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# TRANSMITTAL FORM

Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 1284-001

## GASTROSTOMY TUBE BAND

First Named Inventor: Mrs. Joan Clayton

**SUBMITTED BY**

Name: Ms. JiNan Glasgow Esq.  
Registration Number: 42585  
Electronic Signature Mark: /jg Date Signed: 20010927

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**Attached Files:**

bibd-transmittal	1284001apds.xml
fee-transmittal	1284001fee.xml
specification	Spec1284001.xml
declaration	Dec1284001P1.tif
declaration	Dec1284001P2.tif

**Attached Image File(s):**

Dec1284001P1.tif

Dec1284001P2.tif

**Comments:**

# Electronic Filing System (EFS) Data

## Electronic Patent Application Submission

### USPTO Use Only

EFS ID: 12490  
Application ID: 09682624  
Title of Invention: GASTROSTOMY TUBE BAND  
First Named Inventor: Joan Clayton  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2001-09-28   
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: 1284-001  
Digital Certificate Holder: cn=Jinan Glasgow, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US  
Certificate Message Digest: kdQLZxvWHbRYxeqp5Jj+IA==  
Total Fees Authorized: \$355.0

Payment Category: CC – Credit Card  
Credit Card Number: \*\*\*\*1027  
Expiration Date: 11302003  
Card Holder Name: Guy R Beretich  
RAM User ID: EFSPROD  
RAM Accounting Date: 2001-09-28  
RAM Sequence Number: 346174  
RAM Payment Status: RAM success  
Postal Code: 27611

# FEE TRANSMITTAL

Electronic Version 1.0.4

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*Patent fees are subject to annual revisions on or about October 1st of each year.*

Small Entity

Independent Inventor

**TOTAL FEES AUTHORIZED: \$ 355**

## BANK (CREDIT) CARD INFORMATION:

Credit Card Number:	1027
Expiration Date:	20031130
Authorized Name:	Guy R Beretich
Billing Address:	27611

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 19	203	\$ 9	0	\$ 0
Independent Claims: 2	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0